PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 16817461

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			16.					RATE	FEE	7	RATE	FEE
FC	DR .		NUMBER	FILED	NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	16 mir	nus 20=	· Ø			X\$ 9=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	2 mi	inus 3 =	d			X43=		OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter					"0" in 0	column 2	ľ	TOTAL	381	OR	TOTAL	
CLAIMS AS AMENDED - PART II										1	OTHER	THAN
بسب	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		· X\$ 9=		OR	X\$18≃	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
L	FIRST PRESE	ENTATION OF MI	JETIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL	<u> </u>	'	TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE		1011	ADDIT. FEE	
_		CLAIMS		HIGHE	ST		lг	1	ADDI-	1 [. 1	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	•
·								TOTAL		OB L	TOTAL	•
(Column 1) (Column 2) (Column 3)								DDIT. FEE L	. •	, _.	DDIT. FEE	٠.
	`	CLAIMS		HIGHE	ST	(Column 3)			ADDI-	Г		ADDI-
ENT C		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATÈ	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	44		=	F	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	十	X43=		OR	X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +14									Un		
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
1	he "Highest Num	mber Previously Paid ber Previously Paid	For (Total or	Independer	iess thar it) is the	i 3, enter "3," highest number	found	in the app	opriate box	in colu	mn 1.	